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From: **Grodman, Schyler Z** <Schyler.Z.Grodman@ttuhsc.edu>
Date: Wed, Jan 5, 2022 at 6:24 PM
Subject: Fw: Request for Accommodations
To: Zane Grodman <szaneg@gmail.com>

Schyler Z. Grodman, MD, MS

Resident Physician, 2019-2022

Department of Pediatrics

Texas Tech University Health Sciences Center

1400 South Coulter Street

Amarillo, TX 79106

From: Grodman, Schyler Z
Sent: Wednesday, January 5, 2022 6:23 PM
To: Varma, Surendra
Cc: Stutz, Kristin; Zaid-Kaylani, Samer
Subject: Request for Accommodations

Hello Dr. Varma, hope you are doing well,

I am sending you my completed form to request accommodations from Texas Tech Health Sciences Center. I have attached my request form, and all supporting documentation or prior approved accommodations from previous institutions. I am including Kristin Stutz (regional GME officer) and Dr. Zaid-Kaylani (Pediatric Residency Director in Amarillo, and my direct supervisor) on this email. If there are any issues, please let me know, and I look forward to working with you and the GME office in any way I can.

All the best,

Zane

Schyler Z. Grodman, MD, MS

Resident Physician, 2019-2022

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**Texas Tech University
Health Sciences Center**

CONFIDENTIAL

All information shared with TTUHSC through the ADA/ADAAA evaluation and/or reasonable accommodation process will be maintained separate from personnel files and in accordance with all ADA requirements.

REASONABLE ACCOMMODATION REQUEST

Individuals who are employed by TTUHSC and are requesting reasonable accommodation(s) under the Americans with Disabilities Act of 1990 (ADA) and ADAAA of 2008 (ADAAA) are encouraged to complete this form in its entirety. If you are unable to complete this form on your own, someone else may complete the form on your behalf. Completed forms are to be returned to your supervisor and a copy to your local Human Resources Office.

To be completed by Employee:

Tech ID (R#) R11662133

Name Schyler Zane Grodman

Title Resident Physician

Campus/Location Amarillo

Supervisor's Name Samer Zaid-Kaylani

Request Date 01/03/2022

Email Address Schyler.Z.Grodman@ttuhsc.edu

Department Pediatrics

Telephone (201) 707-2829

Supervisor's Telephone (806) 341-5821

1. Identify the physical and/or mental impairment(s) for which you are requesting accommodation and the expected duration of the impairment(s). Include the date of diagnosis.

PLEASE SEE ATTACHED DOCUMENT

2. Explain how the impairment(s) listed above affect(s) your ability to perform the essential functions of your position according to your job description. If you are a new employee, state the anticipated difficulties you foresee in completing your job duties. Be as specific as possible regarding the job duties you are having difficulty performing or believe you will have difficulty performing. Please attach a copy of your job description.

PLEASE SEE ATTACHED DOCUMENT

3. List the accommodation(s) you are requesting in order to perform your essential job functions.

PLEASE SEE ATTACHED DOCUMENT

4. Add any comments you believe may be helpful in our consideration of your request.
PLEASE SEE ATTACHED DOCUMENT
-
-

5. Medical verification of the impairment(s) (check the appropriate box):

- I have enclosed the applicable medical documents with this request.
- The disability and need for a reasonable accommodation is obvious and no medical documentation is needed. Explain.
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-

NOTE: TTUHSC reserves the right to request documentation if the evaluator believes more information is needed to appropriately assess your condition, functional limitations, and/or request for reasonable accommodation.



01/04/2022

Employee Signature

Date

Supervisor Signature

Date

Instructions: Forward this request and any accompanying documents, including the employee's position description, to the Office of the AVPHR through your respective Human Resources office.

For HR Use Only

According to the ADAAA of 2008, the "rules of construction" have been considered during the reasonable accommodation request process.

Initial

- Reasonable accommodation request approved. Description of reasonable accommodation to be implemented:
-
-

- Reasonable accommodation request denied. Reason: _____

Decision letter sent to requestor on: _____ (date) via regular and certified mail.

HR Designee

Date Request Completed

1. Identify the physical and/or mental impairment(s) for which you are requesting accommodation and the expected duration of the impairment(s). Include the date of diagnosis.

-ADHD: ongoing duration, diagnosed 1993

-Autism Spectrum Disorder: ongoing duration, diagnosed 1993

-Social Anxiety Disorder: ongoing duration, diagnosed 1993

These diagnosed conditions are long term, and are not expected to fully resolve. However, with proper treatment, these conditions can be managed and controlled.

2. Explain how the impairment(s) listed above affect(s) your ability to perform the essential functions of your position according to your job description. If you are a new employee, state the anticipated difficulties you foresee in completing your job duties. Be as specific as possible regarding the job duties you are having difficulty performing or believe you will have difficulty performing. Please attach a copy of your job description.

- ADHD adversely affects attention to detail and promotes impulsivity, which tends to impair my ability to follow up on details related to patient care, and can lead to unintended interpersonal communication issues. The current medication regimen I have been using has not been able to last the duration of 12-hour shifts, much less 24-hour shifts, with increased lapses in focus towards the end of 12-hour shifts, and at the middle onward of 24-hour shifts. Additionally, because of the above-mentioned impairments, I have been unable to adequately prepare for and complete any in-service training examinations or mock board examinations in the ordinary time allotted.

-Being on the spectrum of Autism has always hindered my interpersonal relationships; for as long as I can remember, I have had difficulty with non-verbal communication, picking up on social cues, and communication which has not been straight-forward. As I have communicated from day one, I do best when clear expectations are laid out, and prompt feedback is given. Often-times, I “think out loud” (i.e., verbalizing a thought process that others without my disorder typically do entirely in their minds), which has often led to confusion; others tend to assume my verbalizations are my conclusions, rather than my way to cogitate (e.g., I tend to verbalize my differential diagnosis process, which is mistaken for a final diagnosis). Additionally, I tend to speak more quickly when under pressure, and at times I mumble. People will often ask me to repeat myself, which leads to frustration on my part for not being able to speak correctly in the first place.

I cannot readily locate an official job description. Elements of my training contract and the house staff policies and procedures, which can be supplied, may inform that question. Also, the following is likely to be instructive: patient care activities within the scope of their clinical privileges commensurate with the level of training, attendance at clinical rounds and seminars, timely completion of medical records, and other responsibilities as assigned or as required of all members of the medical staff. Under the supervision of attending physicians, general responsibilities of the resident physician may include:

--Initial and ongoing assessment of patient's medical, physical, and psychosocial status.

--Perform history and physical.

--Develop assessment and treatment plan.

--Perform rounds.

--Record progress notes.
--Order tests, examinations, medications, and therapies.
--Arrange for discharge and after care.
--Write / dictate admission notes, progress notes, procedure notes, and discharge summaries.
--Provide patient education and counseling covering health status, test results, disease processes, and discharge planning.
--Perform procedures.
--Handle and perform other related and required program duties and responsibilities

3. List the accommodation(s) you are requesting in order to perform your essential job functions.

-1.5x extended time on all future in-service training and mock oral examinations, written or oral.
-A separate, isolated location for all future in-service training and mock oral examinations (proctored as in the normal course).
-30 days to meet with and establish local counselling (Dr. Amy Stark), meet with my prior counsellor (Dr. Thomas Brown), and to initiate a new medication regimen and treatment plan.
-An opportunity to collaborate with my program about the components of a remediation plan that are calculated to give me the opportunity to perform at my best, for myself, my patients, and the program.
-Meeting with rotation faculty to receive and review clear, written performance expectations prior to the start of rotations and as needed during rotations.
-Regular, real-time and formative feedback on performance.
-Mentorship (within or without Texas Tech) to assist me with specific performance concerns.
-Any other reasonable thoughts or suggestions from the Texas Tech Pediatrics Residency Program Leadership or the Texas Tech GME
-That time is given for these proposals to be implemented before a final decision is made regarding my standing in the Pediatric Residency Program
I believe these reasonable accommodations will allow me the opportunity to make a positive impact on myself, my patients, and the program.

4. Add any comments you believe may be helpful in our consideration of your request.

When I have received accommodations in the past, such as extended time and a separate testing location, not only have I improved, but I have thrived. I was a national merit semi-finalist in high school, and scored on the 99th percentile on the ACT. I was able to complete a double major at the University of Pennsylvania while having a successful athletic career. I was able to succeed in the Columbia Post-Baccalaureate program, making the Dean's List. Finally, in medical school, I was able to complete an additional master's degree along with my medical doctorate, along with doing significant global health work at Columbia. Even going back to the initial evaluations I underwent as a child, I have always had the ability to be successful; it was only a matter to having the right resources and accommodations.

Residency, particularly serving as a senior resident, imposes a higher degree of stress and difficulty than my prior academic and professional pursuits. Under these circumstances, the effects of my impairments are more acutely felt, and thus requires greater accommodation than

I have previously obtained. I am confident that these accommodations can be implemented and still maintain the integrity of the graduate medical education training needed to complete the program. I am dedicated to make this work.

As part of my probation, imposed on December 17, 2021, I was instructed to meet with CHWR and EAP for counseling related to the above-mentioned impairments. I am in the process of pursuing this and appropriate counseling; I have already met with Amy Stark, a local psychiatrist who has agreed to establish ongoing care with me, and I have personally been in contact with the CHWR to arrange a meeting with them. Adequate time is needed to establish this counseling, and implement an appropriate medication regimen. In the event that it is deemed best, it may be necessary to be placed on a short medical leave to attend to these matters before my performance and standing in the program can be appropriately done. Otherwise, my concern is that my ongoing training (including since at least the imposition of probation) does not best ensure that examination and assessment of me accurately reflects my aptitude or achievement level, but rather reflects my impaired skills and aptitudes.

I look forward to collaborating with the program and the university in the forthcoming interactive process.